

**DUPLICATE
APPLICATION**

**KENTUCKY BOARD OF BARBERING
9114 LEESGATE RD., SUITE 6
LOUISVILLE, KY 40222-5055**

Shop Name _____ License No. _____

Address _____ Shop Phone _____
Number and Street

City _____ Zip _____ County _____

Owner's Name _____

Manager's Name _____ Signature of
Manager _____

IMPORTANT: Complete above application. Licenses shall be renewed beginning June 1 thru July 1 of each year. The renewal fee is \$40.00. Any license application received or postmarked later than July 31, shall be considered expired and a penalty of \$25.00 plus the renewal fee will be required to renew the license.